



07-10-03

B

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

| | | | |
|-------------------------------------|---|-------------------|-------------|
| In re Application of: |) | Atty. Docket No.: | 11738.00079 |
| |) | | |
| Harper et al. |) | | |
| |) | Group Art Unit: | 3763 |
| Serial No.: 09/266,674 |) | | |
| |) | Examiner: | K. Sirmons |
| Filed: March 11, 1999 |) | | |
| |) | | |
| For: Hydrophobic Vent Incorporated |) | | |
| Into Cerebral Spinal Fluid Drainage |) | | |
| Chamber |) | | |

SUBMISSION OF FORMAL DRAWINGS

Mail Stop Issue Fee
Commissioner for Patents
Attn: Official Draftsperson
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

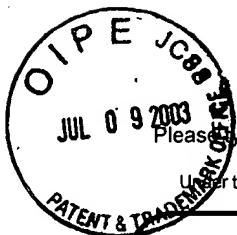
Please find enclosed three (3) sheets of formal drawings (Figs. 1-8).

Respectfully Submitted,

BANNER & WITCOFF, LTD.

Dated: July 9, 2003

By Charles W. Shifley
Charles W. Shifley
Reg. No. 28,042



Please type a plus sign (+) inside this box → ☐

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

| | | | |
|--|-----------------------------|-------------------------------|-------------|
| TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i> | Application Number | 09/266,674 | |
| | Filing Date | March 11, 1999 | |
| | First Named Inventor | Harper | |
| | Group Art Unit | 3763 | |
| | Examiner Name | K. Simons | |
| Total Number of Pages in This Submission | | Attorney Docket Number | 11738.00079 |

| ENCLOSURES (check all that apply) | | |
|---|--|---|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers (for an Application) <input checked="" type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Submission of Formal Drawings |
| Remarks | | Being filed via Express Mail No.: EL941344901US |
| The Commissioner is hereby authorized to charge any deficiencies in payment or credit any overpayment to our Deposit Account 19-0733. | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | |
|--|---------------------------|
| Firm or Individual name | Charles W. Shifley |
| Signature | <i>Charles W. Shifley</i> |
| Date | July 9, 2003 |

| CERTIFICATE OF MAILING | | | |
|---|--|-------------|--|
| I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: <input type="text"/> | | | |
| Typed or printed name | | | |
| Signature | | Date | |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



**CERTIFICATE OF MAILING
(PATENT)**

Express Mail No. EL 941344901 US

Deposited: July 9, 2003

I hereby certify that the attached correspondence, identified below, is being deposited with the United States Postal Service as "Express Mail Post Office to Addressee" under 37 CFR 1.10 on the date indicated above and is addressed to Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

By: Joseph D. Dixon

Application of: Harper

Application No.: 09/266,674

Filing Date: March 11, 1999

Title: Hydrophobic Vent Incorporated into Cerebral Spinal Fluid Drainage Chamber

Transmitted herewith are the following documents:

- ☒ Transmittal (1 page) in duplicate
- ☒ Submission of Formal Drawings Figs. 1 - 8 (1 page)
- ☒ Formal Drawings Figs. 1 - 8 (3 pages)
- ☒ Return Postcard

Attorney Case No.: 11738.00079